



Departmental Quarterly Performance Report

Department Name: Medical Examiner

**Reporting Period:
2003-2004
1st Quarter**

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MAJOR PERFORMANCE INITIATIVES

Describe Key Initiatives and Status

Check all that apply

<p><i>Purchase advanced photographic system.</i></p> <p>Terms completed. Purchase order is expected to be issued by the middle of February.</p> <p>FS1-1, PS1-7</p>	<p><input type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input checked="" type="checkbox"/> Budgeted Priorities</p> <p><input checked="" type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>
<p><i>Conduct Forensic Nurse Pilot Program</i></p> <p>Delay indefinitely due to insufficient funding. Applied for grant funds from U.S. Department of Justice, Office of Community Oriented Policing Services (COPS) . Grant denied. Submitting proposal to Barry University, School of Nursing to explore joint program.</p>	<p><input type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input type="checkbox"/> Budgeted Priorities</p> <p><input checked="" type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>
<p><i>Equip and upgrade the Toxicology Laboratory with up-to-date instrumentation within the next five years to expand laboratory testing capabilities to include drugs and other toxic substances.</i></p> <p>Purchasing Liquid Chromatograph during this fiscal year. This is year #2 in the lease purchase of the Gas and liquid chromatograph mass spectrometers. Each year's payment totals \$58,723 for the two instruments.</p> <p>ES1-1, PS1-7</p>	<p><input checked="" type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input type="checkbox"/> Budgeted Priorities</p> <p><input checked="" type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>

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<p><i>Offer 24 hour internet services to citizens seeking death investigation.</i></p> <p>Installed VertiQ. In process of implementation. Target date for client access is April, 2004.</p> <p>PS1-7, ES4-1</p>	<p><input checked="" type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input type="checkbox"/> Budgeted Priorities</p> <p><input checked="" type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>
<p><i>Development of COOP Plan and update Disaster Plan</i></p> <p>Received Paul Coverdell Forensic Sciences Improvement Services Grant-\$3800. COOP Plan being completed. Disaster Plan to be upgraded.</p> <p>PS1-5</p>	<p><input checked="" type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input type="checkbox"/> Budgeted Priorities</p> <p><input type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>
<p><i>PROFESSIONAL DEVELOPMENT AND TRAINING</i></p> <p>Training for staff ongoing. This quarter's training includes Pathology, Toxicology and Business Office.</p> <p>PS3-1</p>	<p><input checked="" type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input type="checkbox"/> Budgeted Priorities</p> <p><input checked="" type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>
<p><i>OBTAIN ACCREDITATION FOR DEPARTMENT</i></p> <p>National Association of Medical Examiners is recommending accreditation with phase 1 deficiencies including adequate staff coverage at visitor reception area, one certified forensic investigator and continuing education for forensic investigators. Phase 1 deficiencies will become phase 2 deficiencies at next accreditation cycle. Phase 2 deficiencies are mandatory to correct or accreditation will be denied at the next accreditation cycle.</p> <p>PS3-1</p>	<p><input checked="" type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input type="checkbox"/> Budgeted Priorities</p> <p><input checked="" type="checkbox"/> Customer Service</p> <p><input checked="" type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>
<p><i>AMEND ADMINISTRATIVE ORDER FOR FEES</i></p> <p>Amendment of Administrative Order for Fees to include current and new fees. Approval is expected within second quarter.</p>	<p><input type="checkbox"/> Strategic Plan</p> <p><input checked="" type="checkbox"/> Business Plan</p> <p><input checked="" type="checkbox"/> Budgeted Priorities</p> <p><input type="checkbox"/> Customer Service</p> <p><input type="checkbox"/> Workforce Dev.</p> <p><input type="checkbox"/> ECC Project</p> <p><input type="checkbox"/> Audit Response</p> <p><input type="checkbox"/> Other _____</p> <p>(Describe)</p>

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PROVIDE DEPARTMENTAL INTRANET SITE

The intranet site is currently being developed.

PS1-7, ES4-1

☒ *Strategic Plan*

☒ *Business Plan*

☒ *Budgeted Priorities*

☒ *Customer Service*

☐ *Workforce Dev.*

☐ *ECC Project*

☐ *Audit Response*

☐ *Other* _____
(Describe)

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PERSONNEL SUMMARY

A. Filled/Vacancy Report

NUMBER OF FULL-TIME POSITIONS*	Filled as of September 30 of Prior Year	Current Year Budget	Actual Number of Filled and Vacant positions at the end of each quarter							
			Quarter 1		Quarter 2		Quarter 3		Quarter 4	
			Filled	Vacant	Filled	Vacant	Filled	Vacant	Filled	Vacant
			61	2						
62		63								

* Public Safety Departments should report the sworn versus non-sworn personnel separately and Departments with significant part-time, temporary or seasonal help should report these separately.

Notes:

B. Key Vacancies

- Morgue Bureau Supervisor
- Forensic Investigator

C. Turnover Issues

- None

D. Skill/Hiring Issues

- **Statutory requirements:** additional positions in order to assure compliance
- **Budget constraints:** vacant investigator position and all requested new positions
- **Accreditation requirements:** Conversion of temporary clerk to full time position responsible for front desk/clerical duties. Phase 1 becomes Phase 2 deficiencies by Accreditation Board during next accreditation cycle. These are mandatory corrections or accreditation will be denied at the next accreditation cycle.
- **Office of Performance Improvement (OPI) recommendations** more than one year old to add new positions and convert temporary agency positions to full time County positions.

E. Part-time, Temporary and Seasonal Personnel

(Including the number of temporaries long-term with the Department)

- **Front desk clerical position temporary for more than 17 years**
- **Computer position in process of being converted to full time position-was temporary position for five years.**

F. Other Issues

- Administrative Order for fee schedule
- Morgue Bureau Supervisor and Administrative Officer 3 resigned

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• FINANCIAL SUMMARY GENERAL FUND/SPECIAL SERVICES FUND 110

(All Dollars in Thousands)

	PRIOR YEAR Actual	CURRENT FISCAL YEAR						
		Total Annual Budget	Quarter		Year-to-date			
			Budget	Actual	Budget	Actual	\$ Variance	% of Annual Budget
Revenues								
♦	5384	5828	1457	0	1457	0		
♦	870	1042	261	102	261	102		
♦	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
♦								
Total	6254	6870	1718	102	1718	102	0	0
Expense*								
Personnel	4665	5069	1267	1393	1267	1393		
Operating	1796	1801	451	398	451	398		
Capital	4	0	0	0	0	0	0	0
Total	6465	6870	1718	1791	1718	1791	0	0

* Expenditures may be reported by activity as contained in your budget or may be reported by category (personnel, operating and capital).

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- FINANCIAL SUMMARY TRUST FUND-U.S. TREASURY FUND 600**

(All Dollars in Thousands)

	PRIOR YEAR Actual	CURRENT FISCAL YEAR						
		Total Annual Budget	Quarter		Year-to-date			
			Budget	Actual	Budget	Actual	\$ Variance	% of Annual Budget
Revenues								
♦	N/A	N/A	N/A	N/A	N/A	N/A		
♦	N/A	N/A	N/A	N/A	N/A	N/A		
♦	121	248	62	2	62	2		
♦								
Total	121	248	62	2	62	2	0	0
Expense*								
Personnel	31	36	9	0	9	0		
Operating	174	150	37	18	37	18		
Capital	14	62	16	0	16	0	0	0
Total	219	248	62	18	62	18	0	0

Comments:

(Explain variances, discuss significant in-kind services, provide status of aged receivables at 30-60-90-+ days and those scheduled for write-off, if applicable)

Amounts over budget draw from fund balance.

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STATEMENT OF PROJECTION AND OUTLOOK

The Department projects to be within authorized budgeted expenditures and projects that available revenues will exceed expenses except as noted below:

Notes and Issues:

(Summarize any concern or exception which will prohibit the Department from being within authorized budgeted expenditures and available revenues)

- Statutory obligations must be met which do not allow for discretion on budget.
- Unable to control number of deaths occurring within Mimi-Dade County and therefore unable to accurately project the number of investigations to be performed.
- No funds available within the budget to allow for unforeseen emergencies.
- Increased workload demands due to personnel vacancies are negatively impacting on overtime and quality of work product.
- Trust Fund expenditures to continue to be kept separately from General Fund and Special Services Funds in accordance with Federal Regulations

DEPARTMENT DIRECTOR REVIEW

The Department Director has reviewed this report in its entirety and agrees with all information presented including the statement of projection and outlook.

Signature

Department Director

Date _____